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| Effective on 12/08/2004.                                    |                                |                        |               | Complete if Known                                   |                 |                       |                          |
| FEE TRANSMITTAL                                             |                                |                        |               | Application Num                                     | nber 10/5       | 553,353               | Conf. No.: 6993          |
| FEE IK                                                      | AN5                            | IVIII I A              | <b>\</b> L [  | Filing Date                                         | May             | 7, 2007               |                          |
| For FY 2009                                                 |                                |                        |               | First Named Inv                                     | entor Har       | ri SAVILAHTI          |                          |
| Applicant claims small entity status. See 37 CFR 1.27       |                                |                        |               | Examiner Name                                       | J. S            | . Ketter              |                          |
| Applicant claims small                                      | entity status.                 | See 37 CFR 1.2         |               | Art Unit                                            | 163             | 6                     |                          |
| OTAL AMOUNT OF PAYN                                         | MENT (\$)                      | 130.00                 |               | Attorney Docket                                     | t No. 093       | 3-0258PUS1            |                          |
| METHOD OF PAYMENT                                           | (check all                     | that apply)            |               |                                                     |                 |                       |                          |
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| BASIC FILING, SEAR                                          |                                |                        |               |                                                     |                 |                       |                          |
|                                                             |                                |                        |               | CH FEES EXAMINATION FEES  Small Entity Small Entity |                 |                       |                          |
| Application Type                                            | Fee (\$)                       | Fee (\$)               | Fee (\$)      | Fee (\$)                                            | Fee (\$)        | Fee (\$)              | Fees Paid (\$)           |
| Utility                                                     | 330                            | 165                    | 540           | 270                                                 | 220             | 110                   |                          |
| Design                                                      | 220                            | 110                    | 100           | 50                                                  | 140             | 70                    |                          |
| Plant                                                       | 220                            | 110                    | 330           | 165                                                 | 170             | 85                    |                          |
| Reissue                                                     | 330                            | 165                    | 540           | 270                                                 | 650             | 325                   |                          |
| Provisional                                                 | 220                            | 110                    | 0             | 0                                                   | 0               | 0                     |                          |
| EXCESS CLAIM FEE                                            | S                              |                        |               |                                                     |                 |                       | Small Entity             |
| Fee Description Each claim over 20 (including Reissues)     |                                |                        |               |                                                     |                 | <u>Fee (\$)</u><br>52 | <u>Fee (\$)</u><br>26    |
| Each independent claim over 3 (including Reissues)          |                                |                        |               |                                                     |                 | 220                   | 110                      |
| Multiple dependent claims                                   |                                |                        |               |                                                     |                 | 390                   | 195                      |
| Total Claims                                                |                                |                        |               |                                                     |                 | Multiple De           | pendent Claims           |
| 11 20 or HP =                                               | 0                              | _ x                    | _=0           | .00                                                 |                 | Fee (\$)              | Fee Paid (\$)            |
| HP = highest number of total ndep. Claims                   | claims paid for<br>Extra Claim | · -                    | Foo F         | Paid (\$)                                           |                 |                       |                          |
| 3 - 3 or HP = _                                             | 0                              |                        |               | .00                                                 |                 |                       |                          |
| HP = highest number of indep                                |                                |                        |               | <u> </u>                                            |                 |                       |                          |
| APPLICATION SIZE F                                          |                                | wasad 100 aboot        | ta of mome    | om (ovenly dim o                                    | 1               | llv. filed gegreen    |                          |
| f the specification and listings under 37 CF                |                                |                        |               |                                                     |                 |                       |                          |
| sheets or fraction the                                      | ` '''                          |                        |               | ,                                                   |                 | ian ontity) for t     | saon additional 50       |
| <u>Total Sheets</u>                                         | Extra Shee                     | <u>ts</u> <u>Numbe</u> | r of each     | additional 50 c                                     | or fraction t   | hereof Fee (          |                          |
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| Other (e.g., late filing                                    |                                | •                      |               |                                                     |                 | •                     | 130.00                   |
|                                                             |                                |                        |               |                                                     |                 |                       |                          |
| BMITTED BY                                                  | GAI                            | RTH M. DAH             | EN IR         | egistration No.                                     |                 | Talanhan              | 702 205 2000             |
| lature (all files)                                          | U                              | SPTO #43,57            |               | Attorney/Agent)                                     | 28977           |                       | e 703-205-8000           |
| ne (Print/Type) Gerald M.                                   | Murphy, Jr.                    |                        |               |                                                     |                 | Date                  | AAY 1 0 2010             |

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